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| SUPPLEMENTAL REISSUE APPLICATION DECLARATION BY THE INVENTOR | Docket Number (Optional) 1166/61926-A | | | | | | |
|---|--|--|--|--|--|--|--|
| | 1166/61926-A | | | | | | |
| As a below named inventor, I hereby declare that: My residence, mailing address and clitzenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number5,764,724grantedJune 9, 1998, and for which a reissue patent is sought on the invention entitled | | | | | | | |
| (If applicable) | | | | | | | |
| I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.) by reason of a defective specification or drawing. | | | | | | | |
| $\overline{\mathbb{X}}$ by reason of the patentee claiming more or less than he had the right to claim in the patent. | | | | | | | |
| by reason of other errors. | | | | | | | |
| At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening: | | | | | | | |
| The inadvertent failure to include claims such as prido not recite "swinging" the receptor unit, or "verside edge of the table," as recited in the sole indoriginal patent, and do not recite "arms" and "a lis support table" claim 8 of the original patent. | rtical axles in the regions of each dependent method claim 1 of the | | | | | | |

PTO/SB/51 (10-00)
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|---|------------------------|--------|---|-------------|---------------------|---|-------|---------|------------|--|
| (REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2) Docket Number (Optional) 1166/61926-A | | | | | | | | | | |
| All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attomay(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith. | | | | | | | | | | |
| Name(s) Registration Number | | | | | | | | | | |
| Ivan S, Kavrukov 25,161 | | | | | | | | | | |
| Richard F. Jaworski 33,515 | | | | | | | | | | |
| Correspondence Address: Direct all communications about the application to: | | | | | | | | | | |
| X Customer Nu | mber | 2343 | | | | - | Place | ustinen | ventur Bar | |
| Type Customer Number here | | | | | | | | | 32 | |
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| City | | | | | State | | | Zip | | |
| Country | | | | | | | | | | |
| Telephone | | | | | Fax | | | | | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed. | | | | | | | | | | |
| Full name of sole or first inventor (given name, family name) Carl-Eric Ohlsen, | | | | | | | | | | |
| Inventor's signature fusion Chb | | | | D | Date Love, March 30 | | | | | |
| Residence Grevg | .67,5 | -11424 | | lm C | itizenship | , | dish | | | |
| Mailing Address Same as Residence | | | | | | | | | | |
| Full name of second joint inventor (given name, family name) | | | | | | | | | | |
| Inventor's signature | | | D | Date | | | | | | |
| Residence | | | C | Citizenship | | | | | | |
| Mailing Address | | | | | | | | | | |
| Full name of third joint inventor (given name, family name) | | | | | | | | | | |
| Inventor's signature | | | D | Date | | | | | | |
| Residence Ci | | | | | Citizenship | | | | | |
| Mailing Address | | | | | | | | | | |
| Additional joint inventors are named on separately numbered sheets attached hereto. | | | | | | | | | | |